

AO 435 (Rev. 03/08) (WDTX Mod. 6/5/08)		Administrative Office of the United States Courts TRANSCRIPT ORDER		FOR COURT USE ONLY DUE DATE:	
<i>Please Read Instructions:</i>					
1. NAME RAY VELARDE, atty ✓		2. PHONE NUMBER (915) 532-6003		3. DATE 11/14/2012	
4. MAILING ADDRESS 1216 MONTANA AVE.		5. CITY El Paso		6. STATE TX	7. ZIP CODE 79902 9:29
8. CASE NUMBER EP:12-CR-02106 - DB ✓		9. JUDGE D. Briones Garry ✓		DATES OF PROCEEDINGS 10. FROM 11/14/2012 11. TO 11/14/2012 ✓	
12. CASE NAME U.S. v. Marco Antonio Delgado ✓		LOCATION OF PROCEEDINGS 13. CITY El Paso		14. STATE TX ✓	
15. ORDER FOR <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER					
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				Detention ✓	
<input type="checkbox"/> BAIL HEARING				11/14/2012 ✓	
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	
18. SIGNATURE Ray Velarde ✓				PROCESSED BY	
19. DATE 11/14/2012				PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS	
ORDER RECEIVED	DATE	BY			
DEPOSIT PAID				DEPOSIT PAID	
TRANSCRIPT ORDERED				TOTAL CHARGES	
TRANSCRIPT RECEIVED				LESS DEPOSIT	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT				TOTAL DUE	

DISTRIBUTION: COURT COPY TRANSCRIPTION COPY ORDER RECEIPT ORDER COPY